



south dakota
DEPARTMENT OF EDUCATION

Learning. Leadership. Service.

SES (FREE TUTORING) REGISTRATION FORMS

BY DISTRICT

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ANDES CENTRAL SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE Tutoring for my child(ren) listed below.

Name of Child(ren)	Grade	Name of Child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Acadamia.net, Inc (3-8, Math & Reading)
	Babbage Net School SES Program (1-12, Math & Reading)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	Educate Online (former Catapult) (3-12, Math & Reading)
	Failure Free Reading (K-12, Reading)
	TutorCo Online (3-12, Math)
	Tutorial Services (k-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request Free-tutoring for my student(s) for the following reason.

- ____ Student enrolled in another after-school program
- ____ Student involved in after-school activities
- ____ Student doesn't need the services
- ____ Other (please specify) _____
- _____
- _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

BELLE FOURCHE SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE Tutoring for my child(ren) listed below.

Name of Child(ren)	Grade	Name of Child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Babbage Net School SES Program (1-12, Math & Reading)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	Educate Online (former Catapult) (3-12, Math & Reading)
	Failure Free Reading (K-12, Reading)
	Olaudah Learning Center (3-12, Reading)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request Free-tutoring for my student(s) for the following reason.

- ☐ Student enrolled in another after-school program
☐ Student involved in after-school activities
☐ Student doesn't need the services
☐ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

BENNETT COUNTY SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE Tutoring for my child(ren) listed below.

Name of Child(ren)	Grade	Name of Child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Babbage Net School SES Program (1-12, Math & Reading)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	Educate Online (former Catapult) (3-12, Math & Reading)
	Failure Free Reading (K-12, Reading)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request Free-tutoring for my student(s) for the following reason.

- ☐ Student enrolled in another after-school program
☐ Student involved in after-school activities
☐ Student doesn't need the services
☐ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

MCLAUGHLIN SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE tutoring for my child(ren) listed below.

Name of child(ren)	Grade	Name of child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Babbage Net School SES Program (1-12, Math & Reading)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	Educate Online (former Catapult) (3-12, Math & Reading)
	Failure Free Reading (K-12, Reading)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request Free-tutoring for my student(s) for the following reason.

- ____ Student enrolled in another after-school program
____ Student involved in after-school activities
____ Student doesn't need the services
____ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature:_____

Date:_____

OELRICHS SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE Tutoring for my child(ren) listed below.

Name of Child(ren)	Grade	Name of Child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Babbage Net School SES Program (1-12, Math & Reading)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	Educate Online (former Catapult) (3-12, Math & Reading)
	Failure Free Reading (K-12, Reading)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request Free-tutoring for my student(s) for the following reason.

- ____ Student enrolled in another after-school program
____ Student involved in after-school activities
____ Student doesn't need the services
____ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

RAPID CITY SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE tutoring for my child(ren) listed below.

Name of Child(ren)	Grade	Name of child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Acadamia.Net (K-12)
	Achieve High Points (3-12, Math)
	Babbage Net School SES Program (1-12)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	CyberStudy101.net (K-8, Math & Reading)
	Educate Online (former Catapult) (3-12, Math & Reading)
	Failure Free Reading (K-12)
	Olaudah Learning Center (3-13, Reading)
	TutorCo Online (3-12, Math)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request Free tutoring for my student(s) for the following reason.

- ____ Student enrolled in another after-school program
- ____ Student involved in after-school activities
- ____ Student doesn't need the services
- ____ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

SHANNON COUNTY SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE tutoring for my child(ren) listed below.

Name of child(ren)	Grade	Name of child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Acadamia.Net (K-12)
	Babbage Net School SES Program (1-12)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12)
	Educate Online (Catapult) (3-12, Math, Reading)
	Failure Free Reading (K-12, Reading)
	Student Nest (K-12, Math)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request free tutoring for my student(s) for the following reason.

____ Student enrolled in another after-school program

____ Student involved in after-school activities

____ Student doesn't need the services

____ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. I request FREE tutoring for my child(ren) listed below.

Name of Child(ren)

Grade

Name of child(ren)

Grade

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Academia.Net (K-12)
	Achieve HighPoints (3-12 - Math)
	Babbage Net School SES Program (1-12)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12)
	Cyberstudy 101.com (K-8)
	Educate Online (Catapult) (3-12, Math, Reading)
	Excel Achievement Center (K-12)
	Failure Free Reading (K-12)
	Student Nest (1-12)
	Sylvan Learning Center (K-12)
	TutorCo Online (3-12, Math)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. I do NOT request Free tutoring for my student(s) for the following reason.

___ Student enrolled in another after-school program

____ Student involved in after-school activities

____ Student doesn't need the services

Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

SISSETON SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE Tutoring for my child(ren) listed below.

Name of Child(ren)	Grade	Name of Child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Academia.net, Inc (3-8)
	Babbage Net School SES Program (1-12, Math & Reading)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	Educate Online (former Catapult) (3-12, Math & Reading)
	Failure Free Reading (K-12, Reading)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request Free-tutoring for my student(s) for the following reason.

- ____ Student enrolled in another after-school program
____ Student involved in after-school activities
____ Student doesn't need the services
____ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

SMEE SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE tutoring for my child(ren) listed below.

Name of child(ren)	Grade	Name of child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Babbage Net School SES Program (1-12)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	Educate Online (Catapult) (3-12, Math, Reading)
	Failure Free Reading (K-12)
	Smee School District Supplemental Education Program (K-12, Math & Reading)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request Free tutoring for my student(s) for the following reason.

- ____ Student enrolled in another after-school program
- ____ Student involved in after-school activities
- ____ Student doesn't need the services
- ____ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

TODD COUNTY SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE tutoring for my child(ren) listed below.

Name of child(ren)	Grade	Name of Child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Acadamia.Net (K-12)
	Babbage Net School SES Program (1-12)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	Educate Online (Catapult) (3-12, Math, Reading)
	Failure Free Reading (K-12)
	Olaudah Learning Center (3-12, Reading)
	Student Nest (1-12)
	TutorCo Online (3-12, Math)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request Free tutoring for my student(s) for the following reason.

- ☐ Student enrolled in another after-school program
☐ Student involved in after-school activities
☐ Student doesn't need the services
☐ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

WATERTOWN SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE tutoring for my child(ren) listed below.

Name of child(ren)	Grade	Name of Child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Babbage Net School SES Program (1-12)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	Cyberstudy 101.com (K-8, Reading & Math)
	Educate Online (Catapult) (3-12, Math, Reading)
	Failure Free Reading (K-12)
	Student Nest (1-12)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request Free tutoring for my student(s) for the following reason.

- ____ Student enrolled in another after-school program
- ____ Student involved in after-school activities
- ____ Student doesn't need the services
- ____ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

WHITE RIVER SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ___ I request FREE tutoring for my child(ren) listed below.

Name of Child(ren)	Grade	Name of Child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Acadamia.Net (K-12)
	Babbage Net School SES Program (1-12)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	Educate Online (Catapult) (3-12, Math, Reading)
	Failure Free Reading (K-12)
	TutorCo Online (3-12, Math)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ___ I do NOT request Free tutoring for my student(s) for the following reason.

___ Student enrolled in another after-school program

___ Student involved in after-school activities

___ Student doesn't need the services

___ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____

WINNER SCHOOL DISTRICT

No Child Left Behind

FREE TUTORING

Registration Form

Complete all sections in **bold print** and return to school by: _____

1. ____ I request FREE tutoring for my child(ren) listed below.

Name of child(ren)	Grade	Name of Child(ren)	Grade
_____	_____	_____	_____
_____	_____	_____	_____

2. Mark your 1st, 2nd, and 3rd choice of provider;

Providers will be assigned on basis of student need & number of spaces available

Choice	Provider
	Babbage Net School SES Program (1-12)
	Brilliance Academy (K-12, Math & English)
	Club Z! In-Home Tutoring Services (K-12, Math & Reading)
	Educate Online (Catapult) (3-12, Math, Reading)
	Failure Free Reading (K-12)
	Tutorial Services (K-12, Math & Reading)

3. Contact Information

Parent or Guardian Name: _____

Mailing Address: _____

Contact Number(s): _____

4. ____ I do NOT request Free tutoring for my student(s) for the following reason.

- ____ Student enrolled in another after-school program.
____ Student involved in after-school activities
____ Student doesn't need the services
____ Other (please specify) _____

In signing this form, I give the district and school permission to share information about my student with those involved in the development of the student learning plan and progress reporting.

Parent/Guardian Signature: _____

Date: _____